WASHTENAW COMMUNITY COLLEGE
COURSE-SYLLABUS APPROVAL FORM (CSAF)

For help screens, select a field and press F1
SECTION I. COURSE SUBMISSION INFORMATION

1. **Course:** (Enter proposed discipline, number & title here. If changing the number or title of an existing course, give old number or title in box 4 below.)

   Discipline/No: BMG 274   Title: Business Co-op Education II

   Division Code: __BUS__   Department Code: __BUSD__   Effective Term: Winter 2000   ☐ Do not publish in Time Schedule
   ☐ Do not publish in College Catalog

2. **Type of Approval:** (applies to both new courses and changes)

   ☒ Full Approval
   ☐ Conditional Approval

   ☐ This proposal previously received conditional approval for the Term: _____

3. **Reason for Submission:** This Course is being submitted for: (check all that apply)

   ☐ New Course Approval (Skip the rest of Section I and go directly to Section II.)
   ☒ Five-year Syllabus Review   ☒ No changes to course
   ☐ Major Change(s)
   ☐ Minor Change(s) (If not due for review, submit sections I, II, and revised parts of Section III.)
   ☐ Reactivation of Inactive Course
   ☐ Inactivation (Submit Sections I and II only.)

4. **Change Information:** (Check all that apply. Make proposed changes in Section III, Course Syllabus.)

   Minor Changes
   ☐ Course Discipline/Number (was _____)
   ☐ Course Title (was _____)
   ☐ Course Description
   ☐ Capacity (was: ____)
   ☐ Pre or Corequisites
   ☐ Course Objectives
   ☐ Distribution of Contact Hours (contact hours were: lect: ____ lab ____ clin ____ exp ____)
   ☐ Distance Learning - minor (Attach Preliminary Approval Form for Distance Learning & the Section Handout.)
   ☐ Other _____

   Major Changes (Major changes will be reviewed by Curriculum Committee.)
   ☐ Credit hours (credits were: ____)
   ☐ Core Elements: (Elements to be added: _____)
   (Elements to be removed: _____)
   ☐ Grading
   ☐ Course Objectives affecting core elements
   ☐ Total Contact Hours (total contact hours were: ____)
   ☐ Honors (Attach Honors Section Approval Form.)
   ☐ Distance Learning - major (Attach Preliminary Approval Form for Distance Learning & the Student Handout for the Distance Section.)
   ☐ Other _____

5. **Rationale for changes:**

SECTION II. COURSE REVIEW INFORMATION AND SIGNATURES

1. **Department Review** (To be completed by department chair; if recommendation is no, initial and return to preparer with rationale attached.)

   Will significant new resources be required?   ☐ yes ☒ no (If yes, explain _____)
   Have departments that may be affected by this course been consulted?   ☐ yes ☒ no (Explain N/A _____)
   Does the department support approval of this course? ☒ yes ☐ no

   Print: Joseph Flack _____   Signature _____   Date: _____
   Faculty/Preparer

   Print: _____   Signature _____   Date: _____
   Department Chair

2. **Division Review** (To be completed by division dean; if recommendation is no, initial and return with rationale attached.)

   Will significant new resources be required?   ☐ yes ☐ no (If yes, have they been secured? ☐ yes ☐ no)
   Is this a curricular priority for your division? ☐ yes ☐ no (Comment _____)
   What is your estimate of projected enrollment? _____

   Recommendation ☒ Yes ☐ No _____
   Division Dean's Signature   Date

3. **Curriculum Committee Review** (Attach additional comments if necessary.)

   Recommendation ☒ Yes ☐ No _____
   Curriculum Committee Chair's Signature   Date

4. **Vice President for Instruction and Student Services Approval** (Attach additional comments if necessary.)

   Approval   ☒ Yes   ☐ No _____
   Vice President's Signature   Date

Data File _____   ACS Code ____121____   Catalog File Date _____   CIF File Date __11/9/99__

Core Elements Approved _____   New Syllabus Date _____

SECTION III. COURSE SYLLABUS

For help screens, select a field and press F1.

A. COURSE DETAILS (discipline # and title will automatically be entered in 1 and 2 below upon saving or previewing)

1. **Course Discipline & No.:** BMG 274   2. **Course Title:** Business Co-op Education II

3. **Course Description:**

4. **Credit Hours:** _____ varies _____
    If Variable credit, Give Range:
    _____ to _____
    If repeatable for credit, how many
    times? _____

5. **Class Capacity:** _____
(If nonstandard, attach Class
Capacity Exception form.)

6. **Course Options:**
☐ Distance learning (Attach preliminary distance approval form and Section Handout.)
☐ Honors (Complete Part G.)
☐ P/NP Grading (Attach rationale.)

7. **Contact Hours per Semester in:**
    Lecture: _____
    Lab: _____
    Clinical: 120-500
    Experiential: _____
    Total Contact Hrs: _____

8. **Prerequisite(s):**

    Consent of Instructor

9. **Corequisite(s):** (limit to 2)

10. **a. Course Purpose:**
    ☒ Program Specialty
    ☐ Program Support
    ☐ Nonprogram Specialty
    ☐ Transfer
    ☐ Enrichment
    ☐ Basic Skills

b. Is this course a requirement for a program?
☐ Yes (specify the program(s) below)
_____
_____
☒ No

c. Indicate schools to which you want Curriculum Services to send syllabus:
(If transfer is approved, attach documentation.)
☐ EMU
☐ UM
☐ Other _____

B. MAJOR INSTRUCTIONAL UNITS

A major instructional unit is a grouping of topics that naturally relate to one another. List in order the major instructional units. Add additional numbers as needed.

1. CO-OP work Experience – On site
2.
3.
4.
5.
6.
7.
8.
9.
10.

C. CORE ELEMENT INFORMATION

1. Core Element Submission Information: (Please check all that apply)

☐ This course has been previously approved for core elements. List **currently** approved core elements: _____

☐ Please review this course for core elements marked in part 2 below. (Mark only core elements being added or those needing review because of proposed major changes to the course.)

☐ This course does not meet any core elements. Explain _____

2. Proposed Core Element(s): (Mark the boxes of only the elements to be reviewed at this time. For detailed information on the criteria for determining whether a course meets a core element, refer to the Core Element Annotations in the Curriculum Manual.)

☐ 1. To read and listen in a critical and perceptive way; to speak in an organized, clear, and effective manner.

☐ 2. To use information sources and information gathering techniques; to cite sources when producing written communications.

☐ 3. To develop, organize, and express thoughts in writing using Standard English.

☐ 4. To apply basic mathematics through the level of elementary algebra.

☐ 5. To represent and solve problems using mathematical techniques.

☐ 6. To interpret elementary descriptive statistics.

☐ 7. To comprehend and use concepts and ideas.

☐ 8. To develop, express, test, and evaluate ideas.

☐ 9. To analyze problems, develop solutions, and evaluate results in a clear, logical, and consistent manner.

☐ 10. To distinguish between fact and opinion; to recognize biases and fallacies in reasoning.

☐ 11. To use computer systems to achieve professional, educational, and personal objectives.

☐ 12. To apply the protocols of computer use and respect the legal and other rights of individuals or organizations.

☐ 13. To be aware of the artistic experience in personal and cultural enrichment, growth, and communication.

☐ 14. To be aware of the nature and variety of the human experience through the methods and applications of the humanities

☐ 15. To understand the basic principles of scientific inquiry.

☐ 16. To have a knowledge of basic human biological principles, including those related to wellness.

☐ 17. To understand the basic principles of the natural sciences, and their relationship to the environment.

☐ 18. To understand the basic principles and applications of technology.

☐ 19. To understand the principle of integrating technological elements into systems.

☐ 20. To understand the relationship of technology to individuals, society, and the environment.

☐ 21. To understand the methods and applications of the social sciences in exploring the dynamics of human behavior.

☐ 22. To understand those principles and values, including individual rights and civic responsibilities, which maintain and enhance democracy and freedom in a pluralistic society.

☐ 23. To have a working knowledge of the history, structure, and function of American social, political, and economic institutions.

☐ 24. To be aware of the contemporary global community, especially its geographical, cultural, economic, and historical dimensions.

DIRECTIONS: Each core element marked above must be included in the appropriate core element boxes next to the course objectives in SECTION D which directly support that core element.

3. Courses That Partially Satisfy A Core Element In Combination With Other Courses:

☐ If this course is part of a combination of courses that together meet a core element, mark this box. The courses must all be submitted and reviewed together for core element approval.

Other course(s) required _____

Dean's Comments:

Curriculum Committee's Comments:

Vice President's Comments:

D. INSTRUCTIONAL OBJECTIVES AND CORE ELEMENTS SUPPORTED

DIRECTIONS: (These Units should match those listed in Section B.)Use student outcome based language. (Example: The student will develop and support a thesis in an essay.) If the objective is being used to directly support a core element, write the core element number in the box to the right. If needed, additional information on how the core element is to be met and/or assessed for accomplishment can be included under the objective. If desired you may add a section of "overall course objectives" which are not associated with a specific unit. This may be particularly helpful for addressing core elements.

Unit Objectives   **Core Elements**

Unit #1   Second Semester-Advanced Placement

1   The student with the instructor and employer will complete a Cooperative Education Work Agreement which will include hours fo work, location, rate of pay and specific assignments.

2   Using the Student Learning Objectives Form, the student with the instructor and employer will complete a learning plan for the semester. This plan will include a minimum of three learning objectives and criteria for evaluation specific to the students work experience.

3   Using the Student Report in a Cooperative Work Experience Form, the student will write a final report on the Co-op experience including the following item:
♦ A description of the assignment.
♦ A summary of skills and abilities used on the job.
♦ Ways in which coursework was integrated into job tasks.
♦ An assessment of how well th eobjectives established at the beginning of the assignment were achieved.
♦ Other reactions to and/or impressions of the experience.

E. INSTRUCTIONAL METHODS AND EVALUATION

1. Instructional Methods: (Check the appropriate boxes and describe as needed.)

☐ Lecture/Discussion _____   ☐ Field Trips _____

☐ Clinical Instruction _____   ☐ Team Assignments _____

☐ Self-Paced Learning _____   ☐ Telecourse _____

☐ Internet Instruction _____   ☐ Video Seminar _____

☐ Computer Simulations _____   ☐ Laboratory Assignments _____

☒ On-Site Work Experience _____   ☐ Interactive TV _____

☐ Other _____

2. Evaluation Criteria:

☐ Attendance _____   ☐ Quizzes _____

☐ Class Discussion _____   ☐ Tests _____

☐ Papers _____   ☐ Midterm _____

☐ Portfolio _____   ☐ Final Exam _____

☐ Projects _____   ☐ Home Work _____

☐ Reports _____   ☐ Presentations _____

☐ Clinical/Work _____   ☐ Performances _____

☐ Other _____

3. Attendance Requirements: (For Certification or nonevaluative purposes.)

_____

F. EQUIPMENT, FACILITIES, TEXTS, MATERIALS, AND SUPPLIES

1. Special Equipment/Facilities : (Check the appropriate boxes and describe as needed.)

☐ Lab equipment _____   ☐ Testing Center _____

☐ LRC Reserves _____   ☐ Student Competitions _____

☐ Computers _____   ☐ Off-Campus Sites _____

☐ CD ROM _____   ☐ Student Tutors _____

☐ Field Trips _____   ☐ Distance Learning Classroom _____

☐ Other _____

2. Texts: (Please indicate if no text is required.)

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Title: _____ None _____

Author: _____ Copyright Yr: _____

Publisher: _____ Est. Cost: _____

Title: _____

Author: _____ Copyright Yr: _____

Publisher: _____ Est. Cost: _____

Title: _____

Author: _____ Copyright Yr: _____

Publisher: _____ Est. Cost: _____

Title: _____

Author: _____ Copyright Yr: _____

Publisher: _____ Est. Cost: _____

Title: _____

Author: _____ Copyright Yr: _____

Publisher: _____ Est. Cost: _____

Other Texts: _____

3. Supplies and/or Uniforms Student will have to Own or Acquire for Course:
(e.g. calculators, uniforms, tools, and software, etc., excluding pen, pencil, paper, or textbooks.)

Descriptions	Cost Estimates
Variable Per Work Site/Position Assignment	_____
_____	_____
_____	_____

4. Reference Materials Students Will Use:
(e.g. journals, books, manuals, maps, LRC reserves, etc.)

_____

_____

5. Audio/Visual and Computer Materials Students Will Use:
(e.g. films, video tapes, slides, audio tapes, software, CDs, etc.)

Title	Source
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

[X] **New Course Approval**   Final Approval*_____   One-Time Approval __X__   Effective Term _WINTER '94_

    If Final Approval, has this course received one-time approval? yes _____ no _____

    ***Courses submitted for Final Approval must include an official course.**

[ ] **Change in existing Course:** Delete _____ Change _____(specify #2) Effective Term _____

Current or Proposed Dept., Course Number and Title: _BMG 274 / Co-op Experience II_

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(1) Proposed:

A. Dept	B. Course No.	C. Course Title (Abbreviate if necessary)	D. Cr.Hrs. min-max	E. Weekly Contact Hrs.

A. Dept: `B H G` B. Course No: `2 7 4` C. Course Title: `C O - O P   E X P E R I E N C E   I I` D. Cr.Hrs: `0 1` `0 3`

E. Weekly Contact Hrs.: lec [ ] lab [ ] clinical [ ] other [ ]

J. Course Description

"Standard Description for Co-op Experience II."

G. Capacity `2 0`

H. Prerequisite(s)

None

I. Corequisite

None

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(2) Change in: [ ] Course number   [ ] Course title   [ ] Course description   [ ] Prerequisite(s)   [ ] Other _____

    [ ] Credit hours (current cr. hrs:_____)   [ ] Class capacity (current capacity: _____)

Rationale:

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(3) The following conditions have been documented by the appropriate faculty and chairs:

N.A.	Yes	No		
[ ]	[ ]	[X]	a.	Is this course a requirement for a certificate or degree program? If yes, specify:_____
[ ]	[ ]	[X]	b.	Does this course fulfill any of the graduation group requirements?
[ ]	[X]	[ ]	c.	Is there demonstrated need for the course?
[ ]	[X]	[ ]	d.	Have steps been taken to insure that the proposed change will not be similar to, or harm, existing courses or curriculums?
[ ]	[X]	[ ]	e.	Will the course transfer and/or comply with appropriate guidelines?
[ ]	[X]	[ ]	f.	Is this course to be listed in the college catalog?
[ ]	[X]	[ ]	g.	Has the course description been written in catalog format?
[ ]	[X]	[ ]	h.	Can present staff service this course?
[ ]	[X]	[ ]	i.	Is the course number/title consistent with college systems?
[ ]	[X]	[ ]	j.	Will existing facilities be adequate?
[ ]	[ ]	[X]	k.	Are new items of instructional equipment or library materials required?
[ ]	[ ]	[X]	l.	Are there unusual costs to the student in time, tuition, fees, etc.?

(4) Signatures:

	Comments	Signature	Date
Course Initiator(s)		_[signature]_	12/14/93
Department Chair(s)/Area Director(s)			
Dean(s)	_Bella H. Parker_	_BHP_	12/14/93
VP for Instruction/Student Services: One-Time			
Chairperson, Curriculum Committee			
VP for Instruction/Student Services: Final		_[signature]_	12/12

Academic Services Use only:

Special Grading: _____ ACS Code: _____ Entered Catalog File - Date: _____ Entered CIF File - Date: _____